## 1503 143 2623

FEC FORM

## STATEMENT OF ORGANIZATION

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FORM 1		ORGANIZA	ATION		2015 JUN 26 AM 9: 28 Office Use Only
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, type over the lines.	12FÉ4M5	
SLM Corpo	ration PA	AC (Sallie Mae	PAC)	1111	
	<del>                                     </del>				
ADDRESS (number a		O Continental Drive			
(Check if a is changed	d) L				
	L <sup>N</sup>	ewark 		DE STATE ▲	19713 ZIP CODE ▲
COMMITTEE'S E-MA					
(Check if a is changed		n.morrison@salliemae L	e.com 	1 1 1 1	
•		tional Second E-Mail Addi cinfo@pass1.com	ress		
COMMITTEE'S WEB  (Check if is changed	address (No	SS (URL)		l. l. l. l. l.	
2. DATE 0	6 25	2015			
3. FEC IDENTIFIC	CATION NUMB	ER • C		• ,	
4. IS THIS STATE	MENT 🗵	NEW (N) OR	AMENDED (A)		
I certify that I have	examined this S	atement and to the best	of my knowledge and belief it	is true, correct	and complete.
Type or Print Name	of Treasurer V	incent R. Tallman			
Signature of Treasur	er Vincent R.	Tallman With	Valle	Date 06	25 2015
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)